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APPLICANTS

Henry C. Lee, Maitland, FL;

** CONTINUING DATA ***** *msd*** FOREIGN APPLICATIONS ***** *msd*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED **
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY FL	SHEETS DRAWING 8	TOTAL CLAIMS <i>21</i> 16	INDEPENDENT CLAIMS <i>24</i>
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>msd</i>				
Verified and Acknowledged Examiner's Signature _____ Initials _____				

ADDRESS

Patrick C. Keane
 BURNS, DOANE, SWECKER & MATHIS, L.L.P.
 P.O. Box 1404
 Alexandria, VA22313-1404

TITLE

Two dimensional autonomous isotropic detection technique

FILING FEE RECEIVED 1258	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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